



Vermont Department of Health Emergency Medical Services

108 Cherry St., Box 70
Burlington, VT 05402
802-863-7310 1-800-244-0911 (in VT)



Temporary Ambulance Registration

In accordance with the Vermont Emergency Medical Services Rules § 5.4 application is hereby made for an ambulance license by the undersigned:

Please complete the following information, consult reverse page for definitions -

SERVICE NUMBER	SERVICE NAME		LICENSE LEVEL	VEHICLE LEVEL	MILEAGE	DATE
VEHICLE TYPE	YEAR	AMBULANCE MAKE	VEHICLE MAKE	DMV INSPECTION	VEHICLE IDENTIFICATION NUMBER	
I II III OTHER (circle one)						

☐ The vehicle listed above is a replacement or addition to be placed in service on _____.
Date

☐ This vehicle listed above is a loaner, expected dates of operation are _____ to _____.
Date Date

I certify that the above vehicle meets all requirements for licensure as outlined in the Vermont Emergency Medical Services Rules § 5.4 and will be maintained in accordance with that section. Alteration of this document does not relieve me of any duty described in the Department-approved version of this form.

Head of Service (print)

Head of Service
Signature

Date

Temporary Ambulance Registration Approval

This vehicle complies with license requirements as set forth by the Department of Health EMS Rules and the Ambulance Act of 1984 24 VSA §2651 - 2688, and is certified to operate as an ambulance by the above named service until official inspection or until the primary ambulance is returned to service.

Authorizing Agent, VDH - EMS

Date



State of Vermont Ambulance Equipment Standards

Emergency Medical Services Rules § 5.9 - 5.91

Revised March 1, 2003



Specification Definitions

SERVICE NUMBER	SERVICE NAME		LICENSE LEVEL	VEHICLE LEVEL	MILEAGE	DATE
License #?	The legal name of your EMS Organization?		Basic? Intermediate? Paramedic?	Basic? Intermediate? Paramedic?	Your ambulance's current mileage?	Today's date?
VEHICLE TYPE	YEAR	AMBULANCE MAKE	VEHICLE MAKE	DMV INSPECTION	VEHICLE IDENTIFICATION NUMBER	
I - Truck / box II - Van III - Van/box	Date vehicle made?	Who built your ambulance?	Who built your chassis?	Dept. of Motor Vehicle inspection date?	What is the vehicle identification number listed on the registration? 1 2 3 4 5 6 7 8 9 10 11 12 13 14	

§ 5.9 Ambulances shall have as a minimum the following equipment. All equipment must be kept on board at all times.

- 24 disaster tags (met-tags or district approved equivalents)
- Oral glucose
- 1 sterile saline (500 cc. container, must not be past expiration date)
- EMS HEAR Radio (meeting the requirements of § 2.423)
- A portable suction unit with wide bore tubing and a pharyngeal suction tip.
- A fixed oxygen system with M-size tank or equivalent and a variable flow regulator.
- 2 D-sized portable oxygen tanks or equivalent
- 1 variable flow regulator for the D-size tanks.
- Oxygen connector tubing, assorted adult and child size masks and nasal cannulas
- 1 adult bag valve mask unit capable of delivering greater than 90% oxygen, adult mask, and child mask.
- A pediatric bag mask unit with oxygen reservoir is optional.
- 2 adult, 2 child, 2 infant oral airways
- 1 traction splint - HARE, Thomas, or equivalent
- 2 short spineboards of wood or metal with 2 straps each, 9' minimum length, KEDs, Kansas Boards or similar devices.
- 2 long spineboards of wood or metal with 3 straps each, 9' min. length.
- A scoop stretcher, Miller body splint, or similar device may be used for one of the long spine-boards.
- 2 long arm splints. Cardboard, wood, pneumatic, etc. are acceptable.
- 2 long leg splints. Cardboard, wood, pneumatic, etc. are acceptable.
- Cervical collars. At least 1 large, 2 medium, and 1 small
- An adequate supply of bandaging materials to include: large and small sterile dressings, 10" x 30" multi-trauma dressings or equivalent, roller bandage 3" or larger width, triangular bandages, adhesive tape - 1" or larger width rolls, occlusive dressings – foil, Vaseline gauze, or plastic film.
- 2 sterile burn sheets
- 1 obstetrical kit, prepackaged commercial unit or equivalent
- 1 Automated External Defibrillator (AED), or, for Paramedic licensed services, a manual defibrillator. This requirement must be met by July 1, 2003.
- 1 adult sphygmomanometer and stethoscope
- 1 pediatric sphygmomanometer
- 1 Trauma shears
- 1 Activated charcoal not past expiration date
- 2 flashlights (with 2 D size batteries or larger)
- 10 lb. ABC fire extinguisher or two 5 lb. units.
- 1 wheeled ambulance cot with sturdy vehicle fastening hardware, linen, pillows, blankets, and patient safety straps.

Unless the ambulance routinely responds with another agency which provides extrication assistance, the ambulance must also carry the following equipment or its equivalent:

- | | | |
|---|---|---|
| - 2 pairs of leather gloves | - 1 8" Phillips screwdriver | - 2 7/16" (11 mm.) minimum diameter ropes, each at least 50' long. |
| - 1 5 lb. hammer with 12" min. handle | - 1 12" hacksaw with assorted blades | Static non-stretch type rope capable of supporting at least 750 kg. |
| - 2 hard hats with goggles or other helmets with face shields | - 1 10" vice-grip pliers | |
| - 1 12" adjustable open ended wrench | - 1 24" wrecking bar | - 1 2-ton come-a-long with a 15' chain, grab hook and running-hook. |
| - 1 12" regular blade screwdriver | - 1 bolt cutter with 9/16" min. opening | |

§ 5.91 If a service is licensed at an advanced level, then it must have at least one ambulance vehicle equipped with the equipment and supplies necessary to deliver emergency medical treatment specified for that advanced level and as specified in protocols.